

Strengthening Tanzania's M&E Systems and the Evidence Base for Health and Social Services

Background

Health and social service programs have an improved chance of success when priorities, resource allocations, program interventions, and service delivery are guided by relevant, robust, and timely information. USAID/Tanzania approved a new five-year (2014–2019) project phase, known as the MEASURE Evaluation Associate Award for Tanzania (MEASURE Evaluation Tanzania). The MEASURE Evaluation/TZ project contributes to the achievement of the USAID Tanzania Global Health Initiative (GHI) Strategy's (2010–2015) intermediate result 2.2., “**improving integration and effectiveness of (monitoring and evaluation) M&E systems.**” Strong health programs guided by quality data and information are essential for countries to understand the health issues their citizens face and the gaps to be addressed in order to safeguard public health overall and improve quality of life for everyone.

Key Approach

MEASURE Evaluation/TZ's current project approach to helping the government achieve this goal rests on two complementary pillars: (1) an enhanced evidence base derived from evaluation, monitoring, and focused research; and (2) widespread use of this evidence for development of policies and guidelines; advocacy for community health and social service programs; and program planning, budgeting, and implementation.

What We Are Doing

MEASURE Evaluation's activities in Tanzania have evolved since its beginning in 2008. Activities originally focused exclusively on strategic information and building the capacity of local partners in Tanzania to monitor and evaluate their HIV/AIDS programs and report back to USAID. MEASURE Evaluation's work in the country has since expanded to include direct work with selected government ministries, departments, and

agencies involved with health and social programs. The project has three core objectives: the first two focus on improving the use of data for policy, advocacy, and monitoring of health and social service programs, and strengthening M&E systems at the **national** and **subnational** levels; the third objective is to improve the evidence base for action by conducting research and building research capacity. Capacity building, gender integration, sustainability, and collaboration cut across all project activities.



Key activities for Objective 1

Improving national-level data use and strengthening M&E systems

1. Strengthening and operationalizing national M&E systems for most vulnerable children (MVC) programs with the Department of Social Welfare (DSW) in both Mainland and Zanzibar; and supporting the National AIDS Control Program (NACP) to strengthen the health sector's HIV/AIDS M&E system and M&E framework.
2. Improving data use through building capacity of key national staff at the Ministry of Health and Social Welfare (MoHSW); Ministry of Health (MoH) Zanzibar; Zanzibar AIDS Control Program (ZACP); Ministry of Empowerment, Social Welfare, Women, Youth, and Children (MESWYWC) Zanzibar; DSWs in Mainland and Zanzibar; and the NACP.
3. Ensuring data quality with MoHSW, DSW, and other government partners.

Key activities for Objective 2

Improving subnational-level data use and strengthening M&E systems

1. Strengthening M&E systems through: a) support to the government's existing DHIS 2 implementation plan; and b) roll-out of the MVC M&E system in selected districts.
2. Improving data use through: a) data demand and use (DDU) capacity building for regional and district health management teams) and district social welfare officers.
3. Ensuring data quality through: a) undertaking data quality assessments (DQA) among select United States government-supported implementing partners; b) building local capacity to conduct DQA and to routinize data quality reviews in supportive supervision visits; and c) improving monitoring of referrals between health and social services.

Key activities for Objective 3

Improving the evidence base through research capacity enhancement

1. Collaborating with government entities and local organizations to undertake studies, including an evaluation of the impact of savings groups on the well-being of MVC and their households, and an evaluation on the status of home-based care clients.
2. Supporting in-country institutions to develop tailored curricula on selected areas of M&E and also conducting training.
3. Establishing a community of practice (CoP) to facilitate online communication and learning and dissemination of tools for research, teaching, and practice of M&E.
4. Conducting malaria operations research, M&E capacity building, and surveillance.
5. Administering a small grants program and teaming with local researchers, the government

of Tanzania, and community-based organizations; and building capacity for secondary data analyses, research synthesis, and/or small-scale primary data collection studies.

Key Results

- Assisted in developing and launching of the *National Most Vulnerable Children M&E Plan* (Mainland and Zanzibar), 2015
- Assisted in developing a costed national health sector HIV/AIDS M&E system strengthening operational plan
- Launched a national M&E CoP with a start-up membership of over 30 M&E professionals
- Awarded five small grants for local research in HIV/AIDS and gender program areas; 10 new grants planned in 2015/2016
- Conducted DQA and related capacity building among four USAID partners in 2014; six new programs earmarked for 2015
- Conducted a status review and supported roll-out of DHIS 2 in five regions
- Conducted DDU capacity building using data extracted through the DHIS 2 in five focus regions.
- Completed an evaluation of the program distributing long-lasting insecticidal nets through schools in the Southern Zone, mainland Tanzania

Geographic Areas of Focus

MEASURE Evaluation/TZ activities target regions and districts prioritized by USAID. Previous work has been focused in Dar es Salaam, Dodoma, Iringa, Njombe, Morogoro and Singida regions, and Zanzibar; additional new focus regions include Mwanza, Mbeya, and Shinyanga. Some activities are undertaken at the national level with the MoHSW Mainland, MoH Zanzibar, DSWs in Mainland and Zanzibar, NACP, ZACP, and other stakeholders.

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